

EXPRESS MAIL LABEL: EV33399075US DATE: 09-09-2003

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Stop ISSUE FEE**  
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**Alexandria, Virginia 22313-1450**  
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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

204533 7590 07/22/2003  
**BOZICEVIC, FIELD & FRANCIS LLP**  
**200 MIDDLEFIELD RD**  
**SUITE 200**  
**MENLO PARK, CA 94025**

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/027,307 10/19/2001

Li Gan

412493-00074455

9177

TITLE OF INVENTION: HIGH-THROUGHPUT TRANSCRIPTOME AND FUNCTIONAL VALIDATION ANALYSIS **AGY-013C1P**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

YES

\$650

\$300

\$950

10/22/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
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CHAKRABARTI, ARUN K

1634

435-006000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address Form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

**Rebecca D. Taylor****Pamela J. Sherwood****Bozicevic, Field & Francis LLP**

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY and STATE OR COUNTRY)

**AGY Therapeutics, Inc.****South San Francisco, California**Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies **10**

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(Authorized Signature) *Pamela J. Sherwood* (Date)**Pamela J. Sherwood, Reg. No. 36,677 09-10-2003**

09/15/2003 SSESHE2 00000031 500815 10027807

01 FC:2501 650.00 DR  
 02 FC:8001 30.00 DR  
 03 FC:1504 300.00 DR

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